

Medically Speaking

P O BOX 8888 San Francisco, CA 94128

June 1, 1996

No 1

Viewpoint

elcome to this inaugural edition of the QME news letter. I'd like to give you the background behind this news. Since taking on the medical directorship of the IMC in October 1995, I've heard several repetitive themes. Most frequent is that "We only hear from the IMC when they want money." Although I believe and hope that this is a mild exaggeration, it is the perception of some out there. The father of modern communications, Marshall McLuhan once observed that "the perception is the reality." That being the case we will endeavor to be more comprehensible and communicative. In fact it was the feeling of the IMC members that one of the best ways to do this was with a periodic QME newsletter. So there you have it.

Our goal remains as always, to provide QMEs and other interested parties with as much information about what the Council is doing as possible and to obtain meaningful input into the Council's work. We truly believe the Council has made tremendous strides over the past several months. We hope with our newsletter to allow perception to catch up with this fact. Our "columnists" will include our physicians, attorneys and staff as well as anyone else who has good information and a burning desire to be heard. I do hope that this periodical meets some of your needs. Please feel free to give us some feedback regarding the content and style, and things you'd like to hear about in future issues.

D. Allan MacKenzie Executive Medical Director

Reminders for Panel Reports

As a QME physician, you are called upon to render a thorough, formal, objective, and impartial medical-legal report to resolve some or all of the following issues in unrepresented cases:

- ♦ Whether or not injured worker is permanent and stationary
- ◆ The existence of permanent disability or limitations
- The extent and scope of medical treatment
- Disputed medical issues such as apportionment
- The injured worker's preclusion or likely preclusion to engage in his or her usual occupation
- ⇒ You are required to notify the insurance carrier within 5 days that you have been chosen as the panel QME. You should use the QME Appointment Notification Form to do this. Shortly after the insurance company receives your QME Appointment Notification Form, the claims administrator should send you a letter describing the kinds of medical records and information that will be sent to you for consideration in the evaluation. If you schedule the exam with enough lead time, the medical information described in that letter should reach your office by the time appointed for the medical evaluation. You should remind your staff to encourage the injured worker not to schedule the exam within the first two weeks or so of the initial phone call.
- ⇒ The claims administrator should also send a letter to the injured worker describing the kinds of medical information and any pertinent non-medical information they may have in their possession, with a location where the injured worker can review it. The injured worker then has ten days to review the non-medical information and object to all or part of it being sent to you as the evaluating physician. If the injured worker does object, you will not see the non-medical information prior to the evaluation, but depending on ruling by the Appeals Board, you may review it later.

Before you begin the examination itself, make sure that you have received and reviewed all appropriate medical and non-medical information which relates to the injury you have received.

On some occasions, the medical information from treating physicians may not reach the evaluating physician in time for the evaluation. In cases such as these, the evaluation need not be cancelled or re-scheduled. You may go forward with the evaluation as planned, without having first reviewed the previous medical information. After the exam, you may contact the treating physician to request that the medical information be sent to you. If the medical information does not reach you or you will not be able to incorporate the medical information in time to complete your QME report within the time limits (45 days between 1/1/91 and 12/31/93 and 30days for injuries after 1/1/94), complete the report to the best of your ability without the medical information. State in the report that you are doing so based (See Reminders p. 3)

Specialty Guidelines

The following disability evaluation guidelines have been enacted by the IMC pursuant to Legislative mandate.

- ◆ Psychiatric 8 CCR §43
- ♦ Pulmonary 8CCR §44
- ♦ Cardiac 8CCR §45
- Neuromusculoskeletal (back) - 8 CCR §46
- ♦ Immunologic 8 CCR §47

Call 1 (800) 794-6900 to request copies.

INDUSTRIAL MEDICAL COUNCIL

The following providers are currently approved to provide CME credit for QMEs. QMEs must complete 12 credit hours during their 24 month term of appointment. *The IMC does not endorse individual courses*. All QMEs should consult colleagues and contact the providers directly for more information.

California Orthopaedic Assoc (COA) 5380 Elvas Ave., #221 Sacramento, CA 95819 (916) 454-9884

California Chiropractic Assoc (CCA) 7801 Folsom Blvd., #375 Sacramento, CA 95826 (916) 387-0177

David W. O'Brien, Atty at Law * P.O. Box 3509 Covina, CA 91722 (909) 585-7101

Medical Management Institute (MMI) 4050 Katella Ave., #208 Los Alamitos, CA 90720 (310) 795-5678

Calif Society of Industrial Med & Surg. 100 Q Street, #201 Sacramento, CA 95814 (916) 446-4199

Allied Health Care Access 2100 North Main St., #303 Santa Ana, CA 92706 (714) 547-7551

Calif Applicant's Atty Assoc 801 12th Street Sacramento, CA 95814 (916) 444-5155

Genesis Public Incorporated 10455 Sorrento Valley Rd., #103 San Diego, CA 92121 (619) 453-0858

California Compensation Seminars * P.O. Box 280552 Northridge, CA 91328 (818) 349-7853

Enviromed Health Services, Inc. 18 Professional Center Park Way San Rafael, CA 94903 (415) 472-2783

AME/QME Seminars P.O. Box 4906 Orange, CA 92613 (800) 479-0535

Los Angeles College of Chiropractic 16200 East Amber Way Valley Dr Whittier, CA 90609 (310) 947-8755 Lerner Education 9911 West Pico Blvd., #1240 Los Angeles, CA 90035 (800) 838-8584

Division of Workers' Compensation 245 West Broadway, Room 230 Long Beach, CA 90802

Newton Medical Group 1700 California St., #300 San Francisco, CA 94109 (415) 775-0122

Westwood Seminars 17200 Ventura Blvd., #117 Encino, CA 91316 (818) 501-0104

Sharon Collins/Margaret Easton P.O. Box 92032 Pasadena, CA 91109 (213) 664-2316

Int'l Chiropractors Assoc of Calif 9700 Business Park Dr., #406 Sacramento, CA 95827 (916) 362-8816

Comp-Pro Seminars, Inc. 171 Pier Ave., #325 Santa Monica, CA 90405 (310) 822-7471

UCSD Orthomed 4150 Regents Park Row La Jolla, CA 92037 (619) 625-0084

Michael M. Bronshvag, M.D., Inc. 7595 Redwood Blvd., #108 Novato, CA 94945 (415) 464-0373

Comp Rite 540 Golden Circle, #210 Santa Ana, CA 92705 (714) 547-5460

California Medical Association 221 Main Street San Francisco, CA 94120 (415) 541-0900

American Academy of Disability Evaluating Physicians 150 North Wacker Dr., #920 Chicago, Illinois 60606 (800) 456-6095 Western Occpt'l Health Conference 74 New Montgomery, #230 San Francisco, CA 94105 (415) 764-4803

Rehab Nurse Coordinator's Network 9880 Magnolia Ave. Santee, CA 92071 (619) 258-8930

Northbay Workers' Comp Assoc 1275 fourth St., #234 Santa Rosa, CA 95404 (415) 461-8211

Cladia M. Norby, Atty at Law 51 Maria Dr., #821-A Petaluma, CA 94954 (800) 869-0595

Academy of Forensic & Ind Chiropractic Consultants 1115 Geary Blvd. San Francisco, CA 94109 (415) 563-1888

Learning Edge, Inc. * 11260 Wilbur Ave., #102 Northridge, CA 91326 (818) 363-3088

Physician Case Management 1020 29th St., #360 Sacramento, CA 95816 (916) 733-8264

Michael M. Bronshvag, M.D., Inc. Neuro-Musculo-Skeletal System 7595 Redwood Blvd., #108 Novato, CA 94945 (415) 464-0373

U C Ctr for Occptl & Envmtl Health 1301 South 46th St., Bldg. 102 Richmond, CA 94804 (510) 231-5645

University of California-SF 505 Parnassus Ave., Box 0130 San Francisco, CA 94143 (415) 476-2092

CompSense *
P.O. Box 178811
San Diego, CA 92177
(619) 899-2382

Calif Society of PM & R 19830 Lake Chabot, C Castro Valley, CA 94546 (510) 537-7873

* Audio/A-V/or software course available

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Reminders.....(Continued from Fg. 1)

on the records available to you at that time, and indicate whether there are issues you cannot adequately address without the benefit of reviewing medical records; you may further state that, if requested, a supplemental report will be issued after you have received and reviewed the medical records. (8 CCR 35 (c))

Do not request a time-frame extension on the basis of not having received medical information from the Insurance carrier. If a supplemental report is requested, bill the carrier for a supplemental report under the Division of Workers' Compensation (DWC) Medical-Legal Fee Schedule for supplemental reports.(See 8 CCR 9793 (k) & 9795 ML 104 (3))

Some Important Points:

- i) The panel evaluation should only be performed in the office listed on the injured worker's QME panel. It cannot be performed at any other location. (8 CCR 34 (b))
- ii) Communications between the QME physician and the insurance carrier about the QME assignment are prohibited. The merits of the case must not be discussed with representatives of the insurance carrier/provider, or with the employer, or attorneys. Discussions of your QME assignment must be limited to the injured worker during the exam,

consulting physicians, or the Executive Medical Director and/or staff.

iii) The QME exam report must be done by you, the QME physician whose name appears on the injured worker's panel. Do not delegate to anyone the worker's examination or non-clerical preparation of the report.

The following is to be done personally by the QME physician.

- taking a complete history
- reviewing and summarizing prior medical records
- composing and drafting the conclusions of the report

The only functions that may be delegated are those functions, such as taking blood pressure, normally performed by a nurse. If outlining the medical history or excerpting of prior medical records is done by another party, this fact must be disclosed in the report, giving the name of the person performing these functions and their qualifications to do so. However, these tasks should never be delegated for psychiatric evaluations.

iv) All diagnostic tests and procedures must be reasonable and necessary, justified by the medical condition of the injured worker, and must address disputed medical issues.

A Sample Checklist

The following is the minimum that should be included in all QME reports:

- 1) Date of examination
- 2) The location where the examination was performed
- 3) Must state that the physician actually performed examination
- 4) Time spent face to face with the patient
- 5) List of material reviewed or relied upon for the formulation of the physicians' opinion
- 6) History of the injury/illness
- 7) The worker's present complaints
- 8) The worker's relevant medical history including injuries, illnesses, and previous inpairments, if any
- 9) Findings of the physical exam
- 10) Any laboratory or diagnostic test
- 11) A specific diagnosis
- 12) Opinion on work limitations, if
- 13) An opinion as to whether or not

worker is permanent and stationary

- 14) Subjective and objective factors of disability
- 15) Apportionment of disability, if any
- 16) Cause of disability
- 17) The need for continued or future medical care, including what specific care will be needed
- 18) The reasons for your opinions
- 19) Name and qualifications of anyone who assisted in the exam
- 20) Must state under penalty of perjury that you did not violate LC §139.3
- 21) Your original signature (Do not use "dictated but not read")
- 22) Mandatory declaration "I declare under penalty..."
- 23) County of declaration noted
- 24) Summary Form (for AME and QME) required. If psychiatric diagnosis determination if percent of total disability caused by work

Notice of Public Hearings

Public Hearing for Treatment Guidelines for Low Back have been scheduled as follows:

June 4, 1996 (Tuesday) 9:00 a.m. to 5:00 p.m. California State Building 107 South Broadway, Rm. 2020 Los Angeles, CA 90012

June 6, 1996 (Thursday) 9:00 a.m. to 5:00 p.m. 400 Oyster Point Blvd., #205 South San Francisco, CA 94080

If you would like to be added to the IMC mailing list please write to:
Industrial Medical Council
P O Box 8888
S.F., CA 94102

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1) How should staff handle billing disputes? \rightarrow The proper channel to seek recourse for billing dispute is through the Worker's Compensation Appeals Board with whom liens may be filed and penalties may be requested. Remember, lien claims under LC §4903 or 4903.1 (Board rule §10770) must be accompanied by a statement/itemized voucher justifying the charges. Do not simply state that money is due and payable. You must also show proof of service upon the injured worker, the insurance carrier and attorneys of record.

- 2) Is it OK for a QME to solicit a worker to become his or her treating physician? \longrightarrow No, it is a violation of IMC regulation 11(a) to solicit a worker to become his/her treating physician. It is also illegal to make any referrals in exchange for any consideration or compensation "money or otherwise." (LC §5307.6 (d))
- 3) Can a primary treating physician also be on a QME panel? \rightarrow For injuries post 1/1/94, a physician who has served as a primary treating physician for an unrepresented injured worker for an industrial injury cannot act as the evaluating physician for that injury. (8 CCR 31 (e))
- 4) Who handles rating reconsiderations for QME panel evaluations? \longrightarrow The DWC regulations covering ratings reconsideration are at 8 CCR §10164. Your report may not pass review by the Administrative Director's office if:
- You fail to follow IMC procedures and regulations
- You fail to completely address relevant issue or fail to address an issue at all. Violations of LC §4628 and ex parte
 comunication may also support a grant of reconsideration.

The IMC has published a detailed "PHYSICIAN'S GUIDE TO MEDICAL PRACTICE UNDER THE CALIFORNIA WORKERS' COMPENSATION SYSTEM" to inform the medical community about important laws, regulations, procedures and it includes all relevant changes under the 1993 Reform Act. The guide is available in text or disk format for \$ 25.00.

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